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|---|--------------------------|-------------------|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | Docket Number (Optional) | |
| FY 2009 | 09852/0203378-US0 | |
| (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | |
| Application Number 10/551,739-Conf. #4286 | Filed | February 16, 2006 |
| For OIL-IMPREGNATED SINTERED BEARING AND METHOD OF PRODUCING THE SAME | | |
| Art Unit 3656 | Examiner | J. Pilkington |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | |
| <u>Fee</u> | Small Entity F | ee |
| One month (37 CFR 1.17(a)(1)) \$130 | \$65 | \$ |
| X Two months (37 CFR 1.17(a)(2)) \$490 | \$245 | \$490.00 |
| Three months (37 CFR 1.17(a)(3)) \$1110 | \$555 | \$ |
| Four months (37 CFR 1.17(a)(4)) \$1730 | \$865 | \$ |
| Five months (37 CFR 1.17(a)(5)) \$2350 | \$1175 | \$ |
| Applicant claims small entity status. See 37 CFR 1.27. | | |
| A check in the amount of the fee is enclosed. | | |
| Payment by credit card. Form PTO-2038 is attached. | | |
| X The Director has already been authorized to charge fees in this application to a Deposit Account. | | |
| The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to | | |
| Deposit Account Number | | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | |
| I am the applicant/inventor. | | |
| assignee of record of the entire interest. See 37 CFR 3.71. | | |
| Statement under 37 CFR 3.73(b) is enclosed | | 96). |
| attorney or agent of record. Registration Number | 26,272 | |
| attorney or agent under 37 CFR 1.34. | | |
| Registration number if acting under 37 CFR 1.34 | | |
| - men Jan | March 18, 2010 | |
| Signature | Date | |
| Melvin C. Garner | (212) 527-7700 | |
| Typed or printed name | Telephone Number | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below, | | |
| Total of1 forms are submitted. | | |